

May 4, 2004

Co-Sponsor

H.R. 4057, “The Samaritan Initiative Act of 2004”

HELP END CHRONIC HOMELESSNESS

Cosponsors: Northup, Shays, Ney, Simmons, Pickering, Tiberi, Pryce, Matheson, Nancy Johnson, Capuano, Reynolds, Burr, Green; Jerry Lewis; Peter King

Dear Colleague:

I write to urge you to cosponsor H.R. 4057, “The Samaritan Initiative Act of 2004” which creates a new way for federal departments and agencies to work together, using their collective expertise and resources to end chronic homelessness. When enacted, H.R. 4057 would revolutionize how the Federal government addresses holistically the challenges of the chronically homeless.

H.R. 4057 is important because it underscores the need for comprehensive approaches to treating the symptoms underlying homelessness—housing, physical and mental healthcare, education, job training, just to name a few. Studies have shown that chronically homeless persons not only spend significant periods of time living on the streets and in other public spaces, they also cycle repeatedly through a variety of expensive publicly funded care systems including shelters, correctional and health care facilities.

While chronically homeless persons are estimated to be only 10% of the adult homeless population, various studies indicate that this homeless population consumes more than 50% of available emergency homeless resources and averages in some studies approximately \$34,000 a year in publicly-funded hospitalization and correctional services. One research example followed 15 chronically homeless adults and discovered that in one year they had made 299 trips to the hospital emergency room at a cost of \$969,000 to the community public health system.

H.R. 4057 understands that the cost of chronic homelessness to communities across our nation is substantial and these costs are being incurred year after year. The cost of providing supportive housing solutions is substantially offset by savings in other publicly funded systems including hospitals, jails and correctional facilities and has the benefit of achieving a visible reduction in street homelessness, which improves the quality of life for both the individuals being served and the community at large.

The goal of H.R. 4057 is to create an interagency program that would pool housing resources from HUD, supportive services funding from HHS, and case management support from the VA to allow communities, urban and rural, to receive housing and supportive services funding together in a single funding stream to address chronic homelessness.

H.R. 4057, The Samaritan Initiative Act of 2004, would amend the McKinney-Vento Homeless Assistance Act to fund community projects that identify and engage disabled long term homeless individuals (“chronically homeless”), helping to move them from the streets and out of shelters into housing with supportive services including primary health care, mental health and substance abuse treatment. The Samaritan Initiative responds to the concerns of elected officials, law enforcement, Chambers of Commerce and other business organizations and the public to adopt an approach to ending street homelessness that is humane for the individual, has a visible impact on the streets, and is cost effective.

Please join me in creating a new way to treat homelessness, which draws on the collective expertise and resources of our Federal agencies to work together in a seamless manner to address those homeless populations that cost disproportionately a high percentage of resources at the Federal, state and local level. This legislation is supported by many of the major national advocacy groups for the homeless and the mentally ill, as well as the mayors of New York, San Francisco, Los Angeles and Chicago. (See Coalition letter on back.)

Please contact Alix Crockett at 5-2315 for more information or to cosponsor this important legislation. Together we can make a difference.

Sincerely,

Rick Renzi,
District One, Arizona